

DISTRICT'S ANNUAL CLAIM

To Receive Reimbursement for Pupil Transportation Vocational Schools

For Fiscal Year									
Return to: Office of District Support Service Capital Plaza Tower 500 Mero Street Frankfort, KY 40601 Fax: (502) 564-7574		ervices	District Number:						
SECTION I – Transportation from High School To Vocational School									
Trip No.	From High School to Vocational School	Number days pupils transported	Average no. pupils transported	Driver's name (last name, first initial)					
110.	From:	-	transported	(mot many, mot minut)					
	To: From:	_							
	To: From:								
	To:	-							
	From: To:	-							
	From: To:	-							
	From: To:	-							
	From:								
	To: From:	-							
	To:	-							
SECTION II – Transportation From Vocational School To Vocational Training Site									
	SECTION II – ITalis	Number days	Average no.	To vocational Training Site					
Trip Ltr.	From Vocational School to Vocational Training Site	pupils transported	pupils transported	Driver's name (last name, first initial)					
	From: To:	-							
	From:	-							
	To: From:								
	To:	-							
	From: To:	-							
	From:	-							
	To: From:	-							
				re, to provide for the transportation of pupils to					
and from the vocational schools and vocational training Signature:			s shown. I hereb						

DUE: JUNE 30

Reminder: Trip Letters & Numbers should match the VT-1 form submitted in October.

Distri	ct Name:		District Number:				
SECTION I – Transportation from High School To Vocational School							
Trip	From High School to	Number days	Average no.	<i>p</i> · · · ·			
No.	Vocational School	pupils transported	pupils transported	Driver's name (last name, first initial)			
	From:	transported	transported	(tast name, mst metar)			
	To:						
	From:						
	To:						
	From:						
	To:						
	From:						
	To:						
	From:						
	To:						
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	To:						
	From:						
	To: From:						
	To:						
	From:						
	To:						
	From:						
	To: From:						
	To:						
SECTION II – Transportation From Vocational School To Vocational Training Site							
Trip	From Vocational School to	Number days pupils	Average no. pupils	Driver's name			
Ltr.	Vocational Training Site	transported	transported	(last name, first initial)			
	From:						
	To:						
	From:						
	To:						
	From:						
	To:						
	From:						
	To:						
	From:						
	To:						
	To: From:						
	To::						